

## Guidance on eligibility criteria for adult social care

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Below are the links to the new guidance on eligibility criteria for Adult Social Care and the consultation document. This is an important document as it guides local authorities on changes they should be making to their approach to commissioning services and assessing individual need.

### Guidance

[www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/documents/digitalasset/dh\\_102437.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_102437.pdf)

### Consultation document

[www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/documents/digitalasset/dh\\_102436.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_102436.pdf)

Homeless Link is planning to respond to the consultation and invites comments from members to feed in to our consultation. Equally if your organisation is planning to make it's own response it would be useful if you could send it to us.

The Fair Access to Care Services framework was introduced in 2003 to provide councils with a mechanism for allocating the limited resources available for social care as fairly and consistently as possible. This revised guidance is a result of the Commission for Social Care Inspection review and to bring the guidance on eligibility for services into the framework of the new key policy objectives on personalisation and prevention. It aims to make the system fairer and more consistent. The Care and Support Green Paper is likely to have significant further implications for the way social care is delivered so this is an interim measure.

There is recognition that in response to financial pressures some local authorities have raised the eligibility threshold and meet only the highest bands of need. There is evidence that neglecting lower level of need is a short term measure and leads to higher costs in the longer term. The new guidance, while retaining the FACS framework of four bands Critical, Substantial, Moderate and Low, puts a stronger emphasis on prevention and early intervention and the personalisation agenda and interventions that prevent or delay entry into the social care system.

The guidance suggests that preventative strategies should be embedded at every level of the social care system and it is noted that raising the eligibility threshold without parallel investment in prevention may lead to increased demand in the longer term. People who do not reach eligibility criteria should be signposted to alternative forms of support and much more use should be made of universal services such as luncheon clubs, befriending, leisure activities etc.

It is suggested that commissioning needs to include action to support the health and well-being of the population as a whole and not just individuals and that special attention should be made to groups at particular risk and those who are socially and economically excluded. It suggests that directors of finance should consider the potential longer term benefits of local user-led community and voluntary sector organisations to build a broader economy of support. A community wide strategy on prevention and early intervention should be published alongside the council's eligibility criteria addressing the issues around a holistic whole systems approach, diverse delivery partners and addressing barriers to social inclusion.

The use of predictive tools which identifies those who are at risk of future high care costs is encouraged along with the use of assistive technologies. Periods of re-ablement and intermediate care to increase what individuals are able to do for themselves before assessments of longer need are undertaken are suggested.

The CSCI review raised concerns about the quality of the first response to an individual seeking help. It highlighted the inexperience of staff carrying assessments and the problem of people being screened out too early. The guidance suggests that councils need to make the initial response more effective and to co-ordinate a joint approach between health and social care to simplify the journey through care. It also suggests that councils should avoid being too rigid in their categorisation of client groups, and that needs should be considered on a person-centred individual basis. Once needs are identified councils should find ways to meet individuals aspirations and desired outcomes rather than providing specific services. They are also encouraged within the banding system not to impose a hierarchy of need i.e. that threats to social inclusion and participation are as important as inability to carry out personal care.

This revised guidance contains messages to adult social care and to commissioners that are useful to the homeless sector and to the aim of gaining better access to adult social care services for homeless people.

However there is a fundamental resourcing problem, without new resources it is very difficult to make parallel preventative investments. Money cannot be taken away from services that are meeting the needs of people which have been assessed as critical or substantial to invest in preventative strategies in order to prevent or delay other people getting to the point of having critical or substantial needs.

Homeless Link is planning to send in a response to the consultation. It would be very useful to hear from members your response to the proposed changes. The consultation questions asked in the document are outlined below. However you do not have to stick strictly to answering those questions if there are other points you would like to make about eligibility for social care services for your client group.

For instance:

Do you find it hard to get an assessment done for homeless people if they do not fit into the client group categories as defined by the local adult social care?

Is it difficult to get a community care assessment done for an individual who continues to misuse alcohol or drugs?

Does residence in a hostel mean that your client group are not considered to have critical or substantial needs and are therefore ineligible?

Do you think the move that is encouraged for commissioners to act on local needs assessments and to commission services to support the health and well being of the population as a whole, and particular risk groups who are economically and socially excluded could have a positive impact on services for homeless people?

## Questions from consultation document

Q.1: Do you think the guidance sufficiently integrates the application of eligibility criteria within the new policy context of personalisation, choice and control? If not, what changes would you propose?

Q.2: Do you think the guidance sufficiently outlines councils' responsibilities towards their wider community as well as those individuals with eligible needs? If not, what changes would you propose?

Q.3: Do you think the guidance sufficiently explains the need for councils to implement preventative strategies as well as the benefits that such strategies can bring? If not, what changes would you propose?

Q.4: Given the emphasis upon access to universal and preventative services as set out in *Putting People First*, do you think there is still a need for a fourth criteria band (low)? Please give reasons for your answer.

Q5 Do you think the guidance sufficiently underlines the principles of fairness, consistency and transparency in the process for determining eligibility for social care? If not, what changes would you propose?

Q.6: Do you think the guidance itself is sufficiently transparent and understandable for both health and social care professionals and people seeking support? If not, what changes would you propose?  
Equalities

Q.7: To what extent do you think the revised guidance will have a positive impact on equality? Is there anything else that you would like to see in the guidance to manage any adverse impact and to promote positive impact?

Q.8: Do you have any comments about the costs and benefits (monetary or otherwise) that the revised guidance will involve? Do you foresee any impact on local authorities or people seeking support that we have not identified?